



STATE OF TENNESSEE  
Department of Commerce and Insurance  
BOARD OF EXAMINERS FOR LAND SURVEYORS  
500 James Robertson Parkway, 2<sup>nd</sup> Floor  
Nashville, TN 37243-1146  
615-741-3611  
Fax: 615-741-5995

**STATE BOARD VERIFICATION**

\_\_\_\_\_  
(STATE)

The person whose name and address appear below has made application for licensure with the Tennessee Board of Examiners of Land Surveyors and states that he/she is licensed to practice land surveying in your state.

APPLICANT \_\_\_\_\_

ADDRESS \_\_\_\_\_

Please furnish the Tennessee Board with the following information regarding the above named applicant.

NCEES Examination:	<b>FLS</b>	Date _____	Hrs. _____	Passed _____	Failed _____
	<b>PLS</b>	Date _____	Hrs. _____	Passed _____	Failed _____
	<b>State/Other</b>	Date _____	Hrs. _____	Passed _____	Failed _____

If not by examination, please state basis of registration: \_\_\_\_\_

License Number \_\_\_\_\_ Date Issued \_\_\_\_\_

Is license now current? \_\_\_\_\_ If not, state reason: \_\_\_\_\_

Has your Board ever suspended this license? \_\_\_\_\_ If so, please state reason: \_\_\_\_\_

Has your Board ever disciplined this individual? \_\_\_\_\_ If so, please explain: \_\_\_\_\_

Remarks:

Board  
Seal

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date